

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

GENERAL POWER OF ATTORNEY
(for several applications filed in the USPTO)

As a representative of the Assignee, Medtronic Spine LLC, a Delaware limited liability company, I hereby appoint the Practitioners associated with the Customer Number 000046333 to act as our attorneys or agents to prosecute applications filed under Customer Number 000046333 and transact all business in the Patent and Trademark Office connected herewith.

Please address all correspondence and telephone calls regarding this application to:

Haynes and Boone, LLP
901 Main Street, Suite 3100
Dallas, TX 75202-3789
(972) 680-7557
(214) 200-0853 – Fax
ipdocketing@haynesboone.com

The undersigned is the representative for the Assignee of the entire right, title, and interest in the patent application submitted herewith. A copy of the assignment or other documents in the chain of title, if applicable, are attached.

The undersigned (whose title is supplied below) is authorized to act on behalf of the Assignee.

May 20, 2008
Date

Medtronic Spine LLC
By: Noreen C. Johnson
Noreen C. Johnson

Vice President

Title

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Reiley, Mark A. et al.

Application No./Patent No.: 6899719 Filed/Issue Date: May 31, 2005

Entitled: Systems And Methods For Treating Fractured Or Diseased Bone Using Expandable Bodies

Medtronic Spine LLC, a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest
(The extent (by percentage) of its ownership interest is _____ %)

in the patent application/patent identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

REILEY, Mark A.; SCHOLTEN, Arie;

1. From: TALMADGE, Karen D.; SCRIBNER, Robert M. To: Kyphon Inc.
The document was recorded in the United States Patent and Trademark Office at
Reel 009298, Frame 0448, or for which a copy thereof is attached.

2. From: Kyphon Inc. To: Medtronic Spine LLC
The document was recorded in the United States Patent and Trademark Office at
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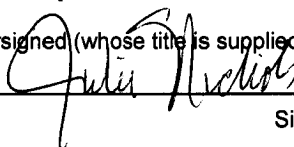
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.


Signature

6/18/08
Date

Julie M. Nickols, Registration No. 50,826
Printed or Typed Name

(972) 739-8640
Telephone Number

Appointed Practitioner
Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioners associated with the Customer Number:

000046333

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:



The address associated with Customer Number:

000046333

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		

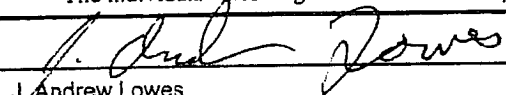
Assignee Name and Address:

Medtronic Spine LLC
2711 Centerville Road, Suite 400
Wilmington, DE 19808

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date	May 2, 2008
Name	J. Andrew Lowes	Telephone	972-680-7557
Title	Appointed Practitioner		

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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